

01-02-01

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))</small>	Attorney Docket No. D-690
	First Inventor or Application Identifier TRAYLOR, Marc
	Title RESILIENT MAGNETIC PAINTBRUSH HOLDER
	Express Mail Label No. EK797189601US

APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
--	---

<div>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small></div> <div>2. <input checked="" type="checkbox"/> Specification [Total Pages 10] <small>(preferred arrangement set forth below)</small><ul style="list-style-type: none">- Descriptive title of the invention- Cross References to Related Applications- Statement Regarding Fed sponsored R & D- Reference to Microfiche Appendix- Background of the invention- Brief Summary of the invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of the Disclosure</div> <div>3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 3]</div> <div>4. Oath or Declaration [Total Pages 2]<ul style="list-style-type: none">a. <input checked="" type="checkbox"/> Newly executed (original or copy)b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) <small>(for continuation/divisional with Box 16 completed)</small><ul style="list-style-type: none">i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).</div>	<div>5. <input type="checkbox"/> Microfiche Computer Program (Appendix)</div> <div>6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)<ul style="list-style-type: none">a. <input type="checkbox"/> Computer Readable Copyb. <input type="checkbox"/> Paper Copy (identical to computer copy)c. <input type="checkbox"/> Statement verifying identity of above copies</div>
---	--

ACCOMPANYING APPLICATION PARTS

7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))
8. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small>
9. <input type="checkbox"/> English Translation Document (if applicable)
10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
11. <input type="checkbox"/> Preliminary Amendment
12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small>
13. <input checked="" type="checkbox"/> * Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application, Status still proper and desired <small>(PTO/SB/09-12)</small>
14. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small>
15. <input type="checkbox"/> Other: Check no. 3631 for \$355

*** NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.29).**

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

<input type="checkbox"/> Continuation	<input type="checkbox"/> Divisional	<input type="checkbox"/> Continuation-in-part (CIP)	of prior application No: _____
---------------------------------------	-------------------------------------	---	--------------------------------

Prior application information: Examiner _____ Group / Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label	(Insert Customer No. or Attach bar code label here)	or <input checked="" type="checkbox"/> Correspondence address below
Name	Daniel C. McKown	
Address	355 Fairview Ave.	
City	Morro Bay	State CA Zip Code 93442
Country	U.S.A.	Telephone (805) 541-5148 Fax

Name (PrintType)	Daniel C. McKown	Registration No. (Attorney/Agent)	26,953
Signature	Daniel C McKown	Date	28 Dec. 2000

0002/PTO
Rev. 10/95U.S. Department of Commerce
Patent and Trademark Office

Complete if Known

FEE TRANSMITTAL

TOTAL AMOUNT OF PAYMENT (\$ 355

Application Number

Filing Date

First Named Inventor

TRAYLOR, Marc

Group Art Unit

Examiner Name

Attorney Docket Number

D-6904



METHOD OF PAYMENT (check one)

- 1 ☐ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit
Account
NumberDeposit
Account
Name

- ☐ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 ☐ Charge the Issue Fee Set in 37 CFR 1.18 at the Making of the Notice of Allowance 37 CFR 1.311(f)

2. ☒ Payment Enclosed:

☒ Check ☐ Money Order ☐ Other

FEE CALCULATION (fees effective 10/01/95)

1 FILING FEE

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
101	201	Utility filing fee	355
106	206	Design filing fee	
107	207	Plant filing fee	
108	208	Reissue filing fee	
114	214	Provisional filing fee	

SUBTOTAL (1) (\$ 355

2. CLAIMS

Total Claims	Extra	Fee from below	Fee Paid
-20 =	<input checked="" type="checkbox"/>		
Independent Claims - 3 =	<input checked="" type="checkbox"/>		
Multiple Dependent Claims	<input checked="" type="checkbox"/>		

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description
103	203	Claims in excess of 20
102	202	Independent claims in excess of 3
104	204	Multiple dependent claim
109	209	Reissue independent claims over original patent
110	210	Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
105	205	Surcharge - late filing fee or oath	
127	227	Surcharge - late provisional filing fee or cover sheet	
139	139	Non-English specification	
147	147	For filing a request for reexamination	
112	112	Requesting publication of SIR prior to Examiner action	
113	113	Requesting publication of SIR after Examiner action	
115	215	Extension for response within first month	
116	216	Extension for response within second month	
117	217	Extension for response within third month	
118	218	Extension for response within fourth month	
119	219	Notice of Appeal	
120	220	Filing a brief in support of an appeal	
121	221	Request for oral hearing	
138	138	Petition to institute a public use proceeding	
140	240	Petition to revive unavoidably abandoned application	
141	241	Petition to revive unintentionally abandoned application	
142	242	Utility issue fee (or reissue)	
143	243	Design issue fee	
144	244	Plant issue fee	
122	122	Petitions to the Commissioner	
123	123	Petitions related to provisional applications	
126	126	Submission of Information Disclosure Stmt	
581	581	Recording each patent assignment per property (times number of properties)	
146	246	Filing a submission after final rejection (37 CFR 1.129(a))	
149	249	For each additional invention to be examined (37 CFR 1.129(b))	
Other fee (specify)			
Other fee (specify)			

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$

SUBMITTED BY

Complete (if applicable)

Typed or
Printed Name

Daniel C. McKown

Reg. Number

26,953

Signature

Daniel C McKown

Date

12/28/00

Deposit Account
User ID